

REQUEST FOR ORAL HEARING BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) TMT-10902/04									
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> In re Application of <div style="text-align: center; margin-top: 5px;">Michael T. Trese</div> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Application Number</td> <td style="width: 40%; border-bottom: 1px solid black;">Filed</td> </tr> <tr> <td style="text-align: center;">10/068,314-Conf. #8834</td> <td style="text-align: center;">February 6, 2002</td> </tr> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> For METHOD FOR VITREOUS LIQUEFACTION </div> <div style="border: 1px solid black; padding: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">Art Unit</td> <td style="width: 20%; border-bottom: 1px solid black;">3763</td> <td style="width: 20%; border-bottom: 1px solid black;">Examiner</td> <td style="width: 20%; border-bottom: 1px solid black;">M. F. Desanto</td> </tr> </table> </div>		Application Number	Filed	10/068,314-Conf. #8834	February 6, 2002	Art Unit	3763	Examiner	M. F. Desanto		
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<p>Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.</p> <p>The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) \$ <u>1,030.00</u></p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>515.00</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>07-1180</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor. <u>/Avery N. Goldstein, Ph.D./</u> Signature</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. <u>Avery N. Goldstein, Ph.D.</u> Typed or printed name</p> <p><input checked="" type="checkbox"/> attorney or agent of record. <u>March 7, 2008</u> Date</p> <p>Registration number <u>39,204</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. <u>(248) 647-6000</u> Telephone number</p> <p>Registration number if acting under 37 CFR 1.34. _____</p> <p><small>NOTE: Signatures of all the inventors or assignors of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p>											
<input type="checkbox"/> Total of <u>1</u> forms are submitted.											